

# DEVELOPING STRATEGIES

To Address the Child Only Caseload



FINAL REPORT

EL PASO COUNTY, CO  
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## **WELFARE PEER TECHNICAL ASSISTANCE NETWORK**

### **DEPARTMENT OF HEALTH AND HUMAN SERVICES OFFICE OF FAMILY ASSISTANCE**

#### **Developing Strategies to Address the Child-Only Caseload**

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**WELFARE PEER TA NETWORK**  
**Developing Strategies to Address the Child-Only Caseload**  
*Final Report*



## I. BACKGROUND

Under the Temporary Assistance to Needy Families (TANF) program, child-only cases—those in which no adult is included in the cash grant—have become an increasing proportion of State TANF caseloads in recent years. Child-only cases are either parental or non-parental—parental cases are those in which the parent is resident in the home, but ineligible for TANF receipt for such reasons as time limits,<sup>1</sup> sanction, alien status, Supplemental Security Income (SSI) receipt, or previous drug felony conviction. Non-parental cases are those in which neither biological parent is present, and another adult, usually a relative, is the primary caregiver. Research indicates that the percentage of child-only cases relative to overall national caseloads increased 200 percent in one decade—from 12 percent in 1990 to nearly 35 percent by 2000.<sup>2</sup> In some States, over fifty percent of their FY2002 caseloads were child-only.<sup>3</sup> More caseload trends are depicted in Table 1, below:

<b>TABLE 1</b>			
<b>TANF CHILD-ONLY CASES: NATIONAL TRENDS</b>			
<b>Fiscal Year</b>	<b>Total TANF Families</b>	<b>Total Child-Only Families</b>	<b>Percentage Child-Only Families</b>
1990	3,976,000	459,000	11.6
1992	4,769,000	707,000	14.8
1994	5,046,000	869,000	17.2
1996	4,553,000	978,000	21.5
1998	3,176,000	743,000	23.4
1999	2,648,000	770,000	29.1
2000	2,269,000	782,000	34.5

In addition to the variability in the proportion of a State's total caseload accounted for by child-only cases, the extant research indicates that the composition of the child-only caseload across the States varies as well. In some States, for example, there is a significantly higher proportion of relative (non-parental) cases, while in others, SSI, immigrant, and sanctioned or time-limited parental cases are more common.

<sup>1</sup> Child-only cases are not subject to such requirements as work participation or time limits. Thus, while parents "time out" of eligibility, children remain eligible, barring full-family sanction policy.

<sup>2</sup> U.S. Department of Health and Human Services, *Characteristics and Financial Circumstances of TANF Recipients*. <http://www.acf.hhs.gov/programs/opre/particip/index.htm>.

In response to these trends, the Welfare Peer Technical Assistance Network conducted discussions with State TANF administrators around the country to assess their current policies and programs designed to meet the needs of the child-only caseload, and to gauge their level of interest in participating a Roundtable on this topic. The responses were overwhelming—we gathered significant information on the current child-only environment, and more than thirty States expressed an interest in the Roundtable concept. The first of these Roundtables entitled *Developing Strategies to Address the Child-Only Caseload* was held April 8-9, 2003 in Colorado Springs (El Paso County), Colorado.<sup>4</sup>

Roundtable participants heard presentations from El Paso County, Colorado, and the States of Washington and New Jersey about innovative practices in those locations. New Jersey then joined South Carolina in a discussion about findings from research and evaluation efforts underway in their home States. Thanks to the hospitality of the El Paso County Department of Human Services, Roundtable participants were able to speak with program supervisors, staff, and customers of the child-only services. They were also exposed, via site tours, to the everyday operations of El Paso County's Family Support Team.

This report describes the meeting, attended by California, Colorado, Hawaii, Missouri, Nevada, New Jersey, Oklahoma, South Carolina, Texas, Virginia, and Washington, and includes important highlights and learnings learned.

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<sup>3</sup> These States include Alabama, Florida, Idaho, North Carolina, South Dakota, Wisconsin, and Wyoming.

<sup>4</sup> At the time publication, the second Roundtable has been tentatively scheduled for June 3-4, 2003 in Trenton, NJ.

## **II. THE CHILD-ONLY CASELOAD: NATIONAL TRENDS AND IMPLICATIONS FOR THE TANF PROGRAM**

David Nielsen from the Department of Health and Human Services' Office of the Assistant Secretary for Planning and Evaluation (ASPE) provided Roundtable participants with a national overview of the trends in the TANF child-only caseload. Generally, the research finds high variability in the composition of the child-only caseload with about half of the caseload composed of parental cases and half in relative care. Within the parental cases, there are parents ineligible for TANF due to sanction, non-citizen status, and SSI receipt. Within the non-parental cases, there are both needy and non-needy cases. Each of these subsets of cases has unique and pressing issues. Extant research indicates that non-citizens struggle to find work and that both they and SSI-recipient families suffer higher levels of food insecurity than other groups. While little is known about the impact of sanctioning, in those States where full-family sanctions are in place, children in sanctioned families never even show up in the child-only data. Generally, ASPE is finding that the needs of a child-only case are greatly influenced by the structure and dynamics of the case.

ASPE is currently involved in a research effort with the Research Triangle Institute (RTI) to answer some of the questions around the child-only caseload. They are interested in exploring the impact of certain policy initiatives (e.g., IV-E waivers), policy proposals (e.g., full-family sanctions under TANF Reauthorization), and policy outcomes (e.g., what is the impact of all of this on overall child well-being measures). Specifically, RTI principal investigator Deborah Gibbs and her team are looking at the service needs and well-being of children in non-parental, child-only TANF homes. To date, they have completed a comprehensive review of the available literature and data and held conversations with Federal staff about current State initiatives. Next steps include an analysis of national data from the Survey of Income and Program Participation (SIPP) and the National Survey of Child and Adolescent Well-being (NSCAW), as well as a five-site case study to determine how local and State agencies have responded to the child-only TANF population.

The study is concerned with the emotional, social, and intellectual development of children and will attempt to ascertain the extent to which point of access to social services (e.g., TANF or child welfare) impacts the type of services a family receives. The study will also address the continuum of child well-being and the challenges inherent in attempting to measure it.

### **III. SPOTLIGHT ON STATES: REVIEW OF STATES' CURRENT STRATEGIES AND CHALLENGES TO ADDRESS THE NEEDS OF CHILD-ONLY TANF CASES**

During this facilitated, interactive dialogue, States were asked to comment on the current status of TANF child-only cases, as well as any noteworthy strategies or challenges they encounter when serving this population.

#### **Nevada**

The State of Nevada experienced a ninety percent increase in their TANF caseload after the terrorist attacks of September 11, 2001. Today, they are still operating with a caseload fifty-six percent higher than in late 2001. The child-only caseload accounts for slightly more than one-third (36%) of the total caseload in Nevada. Of these cases, thirty percent are parental cases—15 percent each ineligible non-citizens, and ineligible SSI recipients. The remaining seventy percent of the caseload are non-parental caretakers, served in three programs: Sixty-five percent in the Non-needy Caretaker program, three percent in the Kinship Care program, and two percent in the Family Preservation program. Financial grants and available services vary depending on which of these programs are serving a particular family.

For the parental cases, Nevada finds Medicaid to be the primary need of the family. These families receive a standard TANF grant, and the adult caregivers are subject to an income standard of 275 percent of poverty.

The Non-needy Caretaker program supports relative caregivers who are themselves income ineligible for TANF. They receive a TANF benefit slightly higher than the standard cash grant, but no other specialized services. Caretakers in this program average 49 years old and provide care to an average of 1.5 children. These children average eight years of age.

The Kinship Care program is an expansion of the Non-needy Caretaker program designed to meet the needs of relative caregivers aged 62 years and older. In addition to the age requirements, caregivers in this program must have been providing “parental care and control” to the children in their home for at least six months, have applied for legal guardianship in the State of Nevada, and pass a background check. If they meet all of these criteria, caregivers receive an increased cash grant, based on a percentage of the foster care payment, and access to additional services such as respite care, child care, and transportation assistance.

The Family Preservation program serves low-income families caring for a child with mental retardation and children under age six with developmental disabilities. The cash grant of



\$350 per month is designed to allow families to keep the children in the home. Families that are receiving Supplemental Security Income payments, but not TANF-related Medicaid payments, become income ineligible at 500 percent of poverty.

Nevada highlighted their Kinship Care program as a success, saying that it evidenced an understanding on the part of State legislators of the scope of the need of child-only TANF cases and of the lack of resources available to meet those needs.

## **Texas**

The State of Texas has 52,000 child-only TANF cases. Of these cases, seventy-nine percent are parental—sixteen percent are a result of the families meeting the State time limit, thirty-eight percent are non-citizen parents, and 23 percent are receiving SSI—and 21 percent are non-parental cases. The State is seeing an increase only in the new cases created by families reaching the State time limit for TANF assistance. The maximum grant available to a family of three is \$311, which Texas calculates to meet about 17 percent of the family's needs.

Challenges cited by Texas include the inability to support non-citizens, the move toward establishing a full-family sanction, and a high rate of return to TANF—over one-third of leavers for work return to TANF within one year.

Successes highlighted include the State's involvement in the Urban Partnerships for Welfare Reform Project,<sup>5</sup> and an increase in the rate of accurate screening for alcohol and drug abuse.

## **California**

California has recently experienced a ten percent increase in their TANF caseload, bringing their total caseload to nearly 200,000 families. Forty-three percent of this caseload is child-only. Three-quarters of the child-only cases are parental—fifteen percent for sanction, seventeen percent for SSI receipt, and forty-three percent are ineligible non-citizens. The remaining quarter of the child-only caseload is children in non-parental care.

Of the forty-three percent of child-only cases ineligible because of citizenship status, nearly two-thirds (64%) are Latino. California is challenged by a lack of connection between

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<sup>5</sup> The Urban Partnerships for Welfare Reform Initiative is an intensive technical assistance effort funded by the Department of Health and Human Services' Office of Family Assistance and Office of Community Services, and the Office of the Assistant Secretary for Planning and Evaluation. The tri-city area of Dallas, Ft. Worth, and Arlington is one of ten urban localities involved in the project.

TANF and employment services, which might allow both systems to understand the immigrant population better. There is a lack of cultural competency in service delivery, which further hinders access to non-eligible parents. Lastly, California is coping with a projected State budget deficit of between \$25 billion and \$38 billion.

Successes highlighted by California include improved child support collections which have led to more service eligibility and more time available for families, and the innovations at the county level in all 58 counties around the State to address the needs of the child-only cases, despite financial shortfalls.

## **Oklahoma**

There are 67,000 grandparents in Oklahoma. Of those, 40,000 are primarily responsible for providing for at least one grandchild. These grandparents tend to be living on fixed incomes, and in housing situations that either will not allow children or lack sufficient space to house them. Thus, housing is a primary challenge for Oklahoma's child-only caseload. Oklahoma also suffers the second highest divorce rate in the country, and is first in both methamphetamine laboratories, and female incarceration.

Oklahoma has had success, however, in contracting with legal aid for TANF families to facilitate SSI application, and in working with the Department of Aging on its annual conference "Grandparents Raising Grandchildren." Oklahoma offers grandparent caregivers a support group (in partnership with the Department of Aging), support for extra needs (i.e., school uniforms, dues, and school supplies), and respite care (through the Oasis program).

## **Hawaii**

The State of Hawaii operates nine programs across two Departments with interest in the child-only caseload. Currently, 800 foster care and 200 relative care child-only cases are open in the State. TANF cases are served in one of two programs: Relative Care or Non-needy TANF.

The Relative Care program, under the auspices of Foster Care, supports children being cared for by kin, as defined by proximity of the relationship, who have been removed from the biological parent. The program is exactly like foster care except for the relationship provision and licensing procedures. The grant amount, as in foster care, is \$529 per child.

The Non-needy TANF program supports non-parental relative caregivers. There is no income/asset standard. The cash grant is lower than in the Relative Care program at \$418/month

plus \$130/month for each additional child, but preferred by caregivers because it affords them greater autonomy and keeps them out of the child welfare system.

Hawaii is especially proud of its State-funded programs for non-citizens and its work-support programs.

## **Virginia**

Virginia has been experiencing growth in the proportion of the TANF caseload accounted for by child-only cases since the early 1990s. Primarily, the child-only caseload is comprised of relative care-givers not receiving assistance. These caregivers are exempted from work requirements, whether aided or not.

Virginia is challenged by financial difficulties—the predicted budget for the next fiscal year allows for services funded at \$158 million/year, while projected need amounts to \$180 million/year. Resources are needed for not only expanding services to meet the demand, but also for creating new initiatives, and they are insufficient to maintain the *status quo*. Further, foster care payments are currently higher than TANF programs, which is inconsistent with the objective of family preservation.

Virginia has, however, recently created a Kinship Care Task Force, charged with developing strategies to operationalize kinship care around the State.

## **Missouri**

In Missouri, child-only cases account for one-quarter of the total TANF caseload. The breakdown is fifty percent each parental (ineligible non-citizens, and SSI families) and non-parental caregivers. Of the non-parental caregivers, one-third are in the Grandparents as Foster Parents program.

The Grandparents as Foster Parents program provides a cash grant equal to 75 percent of the foster care payment. It also provides assistance with child care, clothing, and transportation. In order to be eligible, caregivers must apply for legal guardianship, and, if they are under 50 years of age, attend foster parent training. In 2002, an income test was added to the program. For grandparents over age fifty, the training is not required, but the income test still applies. Grandparents over age fifty who do not attend the foster parent training are not eligible for supportive services (e.g., respite, clothing allowance, transportation assistance). Grandparents under age fifty who do not attend the training are ineligible for the program and must be served by the regular relative care program.

## **New Jersey**

New Jersey has a statewide total of fifty-nine thousand grandparents raising grandchildren, and fourteen thousand TANF child-only cases. Taken together, these statistics results in grandparents as caregivers in nearly two-thirds (63%) of New Jersey's child-only families. Thus, New Jersey focuses much of its efforts on relative caregiver programs.

New Jersey highlighted their Kinship Child Care program, wrap-around services, legislatively-funded research efforts, and a strong grandparent advocate community as strengths in the State.<sup>6</sup>

## **Washington**

The TANF caseload in Washington State has a high proportion of clients with disabilities, and a very geographically concentrated immigrant population. The agricultural areas, primary home to much of the immigrant population, of the State have been experiencing the most significant growth in TANF caseload in recent years.

Washington is proud of the Governor's sub-Cabinet, which has resulted in a streamlined program and improved collaboration with partner agencies, and its Interdisciplinary Team which includes representatives of TANF, child welfare, and Aging and Adult Services, and is developing a Resource Packet to facilitate access to different State agencies.

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<sup>6</sup> Because New Jersey was slated to discuss their program in more detail at a later point in the Roundtable, comments made during the Spotlight session were intentionally brief. Similarly, South Carolina chose not to comment during the session.

## IV. WHAT HAVE WE LEARNED FROM STATE RESEARCH—LESSONS LEARNED FROM SOUTH CAROLINA AND WASHINGTON

### South Carolina

The South Carolina Department of Social Services recently engaged in a research effort to improve the State's understanding of relative caregivers in child-only cases. The research, based on interviews and administrative data, provides information on:

- Characteristics of the child-only caseload in South Carolina
- The stability of child-only homes, and the intent of the caretakers to raise the TANF children to maturity
- Household composition, income, and deprivations
- Some indicators of well-being of the TANF children.

The research effort utilized a stratified random sampling method, based on age of the focal child, with an intentional over-sampling of families with children under age six. Table 2 depicts the sample and respondent numbers.

<b>TABLE 2</b>			
<b>SOUTH CAROLINA RESEARCH POOL</b>			
<b>Age of Focal Child</b>	<b>Universe</b>	<b>Sample</b>	<b>Respondents</b>
Under six years	938	140	116
6-13 years	2,762	149	110
Teens (14-17 years)	1,376	145	118
TOTAL	4,195	434 (10% of 4,195)	344 (79% of 434)

Families with more than one child were prorated across the age groups, as appropriate. When compared to regular adult-headed TANF cases, caretakers in child-only cases have fewer years of education, fewer and older TANF children, and are more likely to be older and married. Of these caretakers, sixty percent care for one child, twenty-five percent care for two, and the remaining fifteen percent care for at least three TANF children. South Carolina's non-parental caretakers are predominantly grandparents or great-grandparents (75%), over fifty years of age (62%), and African-American (80%).

When queried about the primary reason children were placed in their care, relative caregivers primarily reported drug abuse (28%), desertion (20%), child abuse or neglect (16%), incarceration (12%), and death (11%). Administrative records, however, found that at least

seventeen percent of children were in foster care prior to moving in with the relative caregivers, at least thirty-five percent of families had children with prior child welfare involvement, and at least eighteen percent of the TANF children had parents in prison.

TANF children in relative care primarily went directly from their biological parents to the relative caregiver (74%), but some had spent time in foster care (17%), and the others had spent time with other relatives, with potential adoptive parents, and/or in the shelter system. Nearly all relative caregivers (91%) reported wanting to raise the child(ren) to maturity.

In most of South Carolina's TANF child-only households, at least one adult in the home is earning income from employment (52%). Twenty-two percent are receiving SSI benefits, nineteen percent are receiving Social Security Administration benefits, and eleven percent collect retirement or pension benefits. Forty-six percent of these caretakers reported that before factoring in public assistance benefits, their household income was less than \$10,000 per year. An additional thirty-one percent reported income of between \$10,000 and \$20,000. The average TANF benefit was \$140 per month and those that receive food stamps (47%) access \$194 per month in food benefits.

In addition to tenuous financial circumstances, South Carolina's relative caregivers have other concerns and difficulties in raising the children in their care. Table 3 depicts these issues:

<b>TABLE 3</b> <b>CONCERNS AND DIFFICULTIES IN PROVIDING FOR SOUTH CAROLINA'S TANF CHILD-ONLY CASES</b>				
Concern or Difficulty	Percent of Total			
	Preschool	6-13 years	14 years +	All
Providing records, documents to enroll in school	3%	2%	2%	2%
Providing health records to school	3%	3%	2%	2%
Paying for books, school supplies, projects	13%	34%	16%	25%
Paying for clothes, uniforms	29%	57%	46%	47%
Paying for field trips, band, yearbooks	17%	43%	29%	34%
Need child care assistance	29%	9%	N/A	13%
Need childcare so caretaker can go to work	16%	3%	N/A	6%
Getting information about available services	16%	11%	11%	2%

Even in the face of these challenges, however, relative caregivers rate the well-being of their TANF children as above average (48%) or about average (29%) much more consistently than below average (18%) or not good at all (3%). Relative caregivers assess that for about half

of the children, school performance is better than a year ago, and for an additional third performance is about the same. Still, thirteen percent are “doing worse than a year ago.”

Relative caregivers assess their children’s behavior and happiness as “as well behaved and happy as their peers” (60%) nearly three times as often as “more happy and well behaved,” and only between five and ten percent of caretakers say their children are “more poorly behaved and unhappier than their peers.” About 27 percent of children receive routine psychological care, but an additional eleven percent are identified as needing this type of care by their caretakers.

This type of information is helpful to the State in assessing the types of additional supports needed by TANF child-only families. South Carolina has concluded that the following types of support are need by TANF child-only families:

- Higher TANF benefits
- Higher Food Stamp benefits
- Medicaid coverage for caretakers, or medical assistance for the medically needy, and financial assistance with prescriptions
- Counseling for their TANF child(ren)
- Child- and after-school care
- Financial assistance for school-related expenses

Caretakers, meanwhile, specifically identified a core set of needs – more than one-third would like to attend a support group, a quarter would like a home visitor, and twenty-one percent would like to attend a “developmental class” such as parenting or financial management.

Understanding that financial resources do not allow them to provide every type of service to everyone that needs it, South Carolina has develop a hierarchy of service delivery priorities:

- Better case management, psychological services, and supports
- Increase in monthly TANF check
- Medicaid for relative caregiver
- Clothing allowance for school-age children
- Education supports (e.g. band instruments, field trip costs, tutoring)

- Computers, and computer technology assistance
- Respite care

## Washington

As of December 2002, Washington State had nearly 55,000 TANF cases, just over one-third of which were child-only cases. Of these cases, 8,200 were living with relatives, mostly grandparents; 5,100 were children living with parents who receive SSI benefits; 4,700 were children of ineligible non-citizens, 800 were children with parental caregivers disqualified from TANF, and slightly more than 600 were living with unrelated caregivers, including legal guardians, and those acting *in loco parentis*.

In Washington, caregivers receive a base grant of \$349 per month for one child, and an increase for each additional child. Child-only cases do not receive higher grants, but the income and resources of the caregiver are not used to calculate eligibility or grant amount. Washington's typical child-only case has two children averaging 8.5 years of age. The median age of the relative/kinship caregivers is fifty years, compared with thirty-four years for ineligible parents, and forty for unrelated caregivers. Notably, over one-quarter of children in child-only cases have had some involvement with the child welfare system. Ten percent have received mental health services.

In Washington State, relatives caring for children in State custody can become licensed foster care parents and receive about \$440 per month per child. Table 4, below, compares monthly payments provided to relative caregivers under TANF to those receiving foster care payments:

<b>TABLE 4</b>		
<b>COMPARING TANF CHILD-ONLY TO FOSTER CARE PAYMENT RATES</b>		
<b>Number of Children</b>	<b>TANF Child-Only</b>	<b>Foster Care</b>
1	\$349	\$440
2	\$440	\$880
3	\$546	\$1,320

In 2001, the State Legislature directed the Washington State Institute for Public Policy (WSIPP), a nonpartisan research group, to study the prevalence of kinship care in the State, and to identify the needs of kinship caregivers. In 2002, the Legislature directed the Department of Social and Health Services to convene a workgroup to review WSIPP findings and make



recommendations on “policy issues to be considered in making kinship care a robust component of the out-of-home placement spectrum.”

Among WSIPP’s key findings are that relative caregivers are currently caring for two percent of all of the children in Washington. The average age of these children is nine years. Only eleven percent of these children were placed in relative care because of the State child welfare system. Most caregivers are grandmothers, who have lower incomes and less education than average. Kinship families are twice as likely as other families to live below the Federal poverty line. Over eighty percent of caregivers report an intention to raise the TANF child to maturity.

Washington State conducted focus groups with caregivers to determine their most pressing needs. Among the challenges cited by the caregivers were:

- Meeting basic financial needs
- Accessing medical care
- Meeting housing and transportation needs
- Navigating bureaucratic barriers (e.g. complex eligibility rules)
- Establishing legal custody, because of complexity and costs associated with legal system
- Lacking relative caregiver rights.

In response to these research findings, the legislatively mandated Kinship Care Working Group issued a number of recommendations on changes needed to better support kinship caregivers:

- Increasing the TANF child-only grant
- Creating kinship navigators that can help connect kinship caregivers to available services
- Strengthening the child welfare system’s relative search process
- Streamlining the TANF application process for relative caregivers
- Establishing a legal services pilot involving collaboration with kinship care attorneys and social service agencies

- Adopting a *Caregiver's Authorization Affidavit* that would authorize relative caregivers to enroll children in school and obtain medical care for children
- Establishing a support services fund for relative caregivers.

## **V. THE EL PASO COUNTY EXPERIENCE**

As a county-Administered TANF State, Colorado has empowered its counties to design and operate TANF programs at the local level. In response to the desire of relative caregivers to avoid entry into the child welfare system, but still access resources necessary to support their families, El Paso County (Colorado Springs) created a special unit within its TANF administration to provide services for child-only cases. Four professional MSWs, three employment technicians, and one supervisor staff this unit, called the Family Support Team (FST). This blending of caseworkers and technicians allows the FST to identify and support the needs of child-only cases, in-line with the objectives of TANF. Caseworkers provide home studies, assistance with guardianship, and intervention to prevent foster care placement. They receive 15 inter-agency referrals every day, have an average caseload of twenty families, and recommend action items to TANF case managers to assist families with self-sufficiency. Technicians conduct intake, determine eligibility, approve basic grants, and supportive payments on daily basis. They interview between 18 and 20 new families every weeks, provide resource information, offer assistance, and make referrals on the consumer's behalf.

The Family Support Team provides services through four programs: Kincare, SSI Families, Immigrant Families, and Subsidized Permanent Custody. The Kincare program assists relative caregivers with supportive services to prevent foster care placement. SSI Families are parental cases where the adult is TANF ineligible because of SSI receipt, and are assisted with poverty and disability related challenges. Immigrant families are those in which one or more of the parents have not established citizenship, and are therefore TANF ineligible. Families tend to have little or no work history, are unable to secure work because of immigrant status. These families are served through strong resources ties to local churches. The Subsidized Permanent Custody was once relative certified foster care, but transitions families from child welfare to voluntary services and supplements the TANF grant up to the foster care payment level.

El Paso County also operates several grandparent advocacy programs, under the auspices of Grandparent Advocate Diana Wills. These programs are designed to meet the unique needs of grandparents as primary caregivers, including assistance with application forms, legal issues, and school-related challenges. Both grandparents and grandchildren are offered a support group environment, and there is a resource room run via collaboration between El Paso County and the City of Colorado Springs.

## **VI. THE NEW JERSEY EXPERIENCE**

New Jersey's Kinship Navigator Program is designed to provide information, referral, and advocacy services for family caregivers. The first feature highlighted was the Kinship Child Care Program, which provides child care subsidies specifically for kinship families. Caregivers up to age sixty are income eligible up to 350 percent of the Federal poverty level (\$52,570 for a family of three), while those over age sixty years are income eligible up to 500 percent of the Federal poverty level (\$75,100 for a family of three). Families are responsible for a sliding scale co-pay.

The Kinship Wraparound Program is designed to provide funding for short-term or one-time expenses for kinship families. Income eligibility standards are the same as for Kinship Child Care. This program provides for moving expenses, clothes, school expenses, computers, and camp and other extracurricular expenses. Each family can access up to \$1,000 per year in approved expenses. The average amount requested is much less.

In October of 2001, New Jersey established Kinship Legal Guardianship, a service run through the Family (rather than Probate) Court system. This streamlined guardianship process requires no filing fee and is used when 1) the child has been residing with the relative caregiver for at least one year; 2) the parent is incapacitated (unable, unavailable, or unwilling to care for the child), and; 3) legal guardianship is in the best interest of the child. The process transfers some parental rights to the relative caregiver without terminating all parental rights and obligations. This allows the caregiver to more easily access services for the child, and provides a more permanent plan for the child.

New Jersey has three new kinship initiatives: Kinship Care Subsidy Program, Department of Youth and Family Service (DYFS) Guardianship Subsidy Program, and DYFS Relative Care Permanency Support.

The Kinship Care Subsidy Program is available to relative caregivers who have had the child living with them for one year, are at or below 150 percent of the Federal poverty level, are not currently involved with child welfare (although closed cases are acceptable), and have established legal guardianship. The subsidy is \$250 per month, per child. The court assessment for guardianship is facilitated through Kinship Navigator.

The DYFS Guardianship Subsidy Program supports relative caregivers of children placed by DYFS due to safety and risk concerns. The relative caregiver must have been providing for the child for one year, and be recognized as the eventual legal guardian in the child's

Permanency Plan. This subsidy is also \$250 per month, per child. DYFS will provide the assessment for legal guardianship.

The DYFS Relative Care Permanency Support targets relative caregivers responsible for children placed with them by DYFS due to safety and risk concerns. These families can access up to \$250/month for up to fifteen months. Caregivers must cooperate with the Permanency Plan—including returning the child home, adoption, legal guardianship and legal custody as options.

A study, conducted by Mathematica Policy Research, found that child-only cases constitute one-third of New Jersey's TANF caseload. Sixty-three percent of these cases are non-parental. Of the non-parental cases, about seventy percent are grandparent caregivers, averaging fifty-two years of age. These care arrangements tend to be long-term, stable, and home to more than one child. Most have been involved with the child welfare system, and many will have school and behavioral problems as they get older.

A disabled parent receiving Supplemental Security Income benefits, and therefore TANF ineligible, heads twenty-five percent of child-only cases. Food insecurity is the primary issue facing these families. SSI-receiving families have monthly income of about \$1,126. For the ten percent of the child-only cases headed by ineligible non-citizen parents, households tend to be much larger, and work-related skills are very limited. These families have monthly income of about \$800.

## VII. STATE POLICIES AND PRACTICES

In planning for this first Roundtable, the Welfare Peer Technical Assistance Network held in-depth discussions with over twenty States regarding their policies and procedures for supporting TANF child-only families. While many of those States were involved in this first Roundtable, some were not. This session afforded the research team an opportunity to comment on some of the innovations uncovered, as well as the common themes and lessons learned from the research effort. Some of the salient findings are:

- **Caseload composition varies across States**—in both the primary parental-non-parental distinction, as well as in the subdivisions within each category, different States are working to serve greatly diverse clients families.
- **States have developed innovative strategies for meeting the needs of their particular caseload**—several States have developed noteworthy policies, tools, and systems to support the needs of child-only TANF cases.
- **The characteristics of child-only cases are important for policymaking**—children in child-only TANF cases often face multiple barriers as well as a history of abuse and neglect. Adult caregivers often have less than average formal education and work history, as well as other significant barriers to employment.

The findings of the entire research effort are available from the Welfare Peer Technical Assistance Network's Web site at [http://www.calib.com/peerta/pdf/child\\_only.pdf](http://www.calib.com/peerta/pdf/child_only.pdf).

## VIII. WHERE DO WE GO FROM HERE?

In an effort to synthesize and solidify all of the important findings of the Roundtable, the final session asked participants to reflect both on what they found most helpful about the meeting, and on what they might suggest for future meetings.

Participants highlighted the following as important meeting outcomes:

- An understanding that service integration is key to providing a holistic approach to serving child-only cases.
- A focus on how to ensure child well-being without reverting to a prescriptive, AFDC-style approach to service delivery.
- An improved understanding of innovative ways to allocate resources.
- A strategy for returning the policy focus to children and their safety and well-being, rather than focusing on the issues/barriers facing the caretakers.
- Exposure to the El Paso County philosophy with respect to thinking holistically about child welfare, rather than focusing on administrative goals, like work participation rates.
- An improved understanding of the local administrative perspective. A focus on how to meet the needs of child-only families in an administratively devolved system.
- A vision that improving services is, in fact, possible.
- A realization that future technical assistance is available.
- Exposure to good ideas and an improved appreciation for program flexibility
- Exposure to ideas about prevention services and the ways that the child-only caseload is tied to the healthy marriage initiative.

When asked to reflect on future meetings, participants offered the following suggestions:

- A sense of how to develop child-only strategies that compliment TANF policies.
- How to integrate service and program sides.
- Housing strategies for kinship care
- A discussion about shifting resources and priorities to deal with child-only caseload

- More detailed information about program implementation
- How to fit child-only strategies together with the healthy marriage initiative.

The Welfare Peer TA Network will use these reflections in planning future Child-Only Roundtables.



**APPENDIX A:**  
**ROUNDTABLE AGENDA**



# Developing Strategies to Address the Child - Only Caseload

Colorado Springs, CO

April 8 - 9, 2003

## AGENDA

### Tuesday, April 8, 2003

**8:15 am - 9:00 am      Registration and Networking Breakfast**

**9:00 am - 9:30 am      Welcome and Introductions**

John Horejsi, Federal Project Officer, Administration for Children and Families (ACF)  
Thomas Sullivan, Regional Administrator, ACF Region VIII

**9:30 am - 10:30 am      The Child-Only Caseload:  
National Trends and Implications for the TANF Program**

David Nielsen, Office of the Assistant Secretary for Planning and Evaluation

**10:30 am - 10:45 am      Break**

**10:45 am - 12:00 pm      Spotlight on the States: Review of States' Current Strategies and Challenges to  
Address the Needs of Child-Only TANF Cases**

Facilitated Interactive Dialogue Among States

**12:00 pm - 1:15 pm      Working Lunch: What Have We Learned from State Research—Lessons Learned  
from South Carolina and Washington**

Marilyn Edelhoch & Linda Martin, South Carolina  
Phyllis Lowe, Washington

**1:15 pm - 2:00 pm      The El Paso County Experience:  
*An Approach to Addressing the Needs of Non-Parental Child-Only Cases***

David Berns, Barbara Drake, & Roni Spaulding, El Paso County

**2:00 pm - 4:30 pm      Tour of the El Paso County Program**

**2:15 pm - 3:15 pm      Staff Perspectives**

El Paso County staff will discuss the Family Support Team and present their approach to addressing the needs of child-only caseload.

**3:15 pm - 3:30 pm      Break**

**3:30 pm - 4:30 pm      Client Perspectives**

Focus Group with Child-Only Relative Caregivers Regarding Their Service Needs.

## Wednesday, April 9, 2003

- |                            |   |
|----------------------------|---|
| <b>8:00 am - 8:30 am</b>   | <b>Networking Breakfast and Reflections on the Site Visit</b><br>Facilitator: Jeanette M. Hercik, Ph.D., Caliber Associates                         |
| <b>8:30 am - 9:45 am</b>   | <b>The New Jersey Experience:</b><br><b><i>An Approach to Addressing the Needs of Non-Parental Child-Only Cases</i></b><br>Jean Strauss, New Jersey |
| <b>9:45 am - 10:00 am</b>  | <b>Break</b>  |
| <b>10:00 am - 11:15 am</b> | <b>State Policies &amp; Practices</b><br>Jeanette M. Hercik, Ph.D., Caliber Associates<br>Courtney J. Kakuska, Caliber Associates                   |
| <b>11:15 am - 11:45 am</b> | <b>Where Do We Go From Here?</b><br>What States Can Do – Options from Policy Review to Program Implementation                                       |
| <b>11:45 am - 12:00 pm</b> | <b>Closing Remarks and Evaluation</b><br>John Horejsi, ACF  |

**APPENDIX B:**  
**ROUNDTABLE PARTICIPANTS**



# Developing Strategies to Address the Child - Only Caseload

Colorado Springs, CO

April 8 - 9, 2003

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**APPENDIX C:**  
**ROUNDTABLE EVALUATIONS**



## ROUNDTABLE EVALUATIONS

Roundtable attendees were asked to evaluate the meeting by reporting the extent to which they agreed with the following statements. In the response scale, a rating of “1” indicated a strong disagreement, while “5” represented strong agreement. Table C-1 presents the percentage of responses at each level, 1 through 5.

<b>TABLE C-1</b> <b>DEVELOPING STRATEGIES TO ADDRESS THE CHILD-ONLY CASELOAD</b> <b>ROUNDTABLE EVALUATIONS</b>					
	<b>Strongly Disagree (1)</b>				<b>Strongly Agree (5)</b>
Conference planners adequately prepared me for the meeting by providing clear written and verbal communication regarding the meeting’s purpose and expected outcomes	0%	0%	27%	27%	46%
Conference planners handled the preparation, arrangements, and scheduling of the event in a timely, courteous, and competent manner.	0%	0%	13%	27%	60%
The speakers were thorough in the subject areas presented.	0%	0%	6%	27%	67%
The speakers engaged the audience and facilitated interactive discussions.	0%	0%	0%	33%	67%
The information will be useful to me/my staff in developing new approaches to the child-only caseload.	0%	0%	20%	27%	53%

**What did you find most useful about attending this Roundtable (i.e., any immediate or long-term benefits to you/your staff that you anticipate as a result of attending this Roundtable)?**

- Interactions with other States—all States have interesting things going on.
- Diversity of presentations
- Opportunity to hear from staff at all levels
- Opportunity for interactive discussion
- Interesting ideas on supportive services, integration, and funding
- The session was excellent. I particularly enjoyed the size of the group and opportunity and freedom to share ideas.

- Awareness of the Welfare Peer Technical Assistance Network
- I enjoyed hearing and seeing what is happening in El Paso County. The innovative ideas and the shared vision and philosophy were inspiring, but seeing that it worked in an everyday, practical matter was what I needed to see
- Ideas regarding long-term planning
- Diversity of experiences and information
- State and local contacts

**What issues would you like to have had more discussion about during the Roundtable?**

- More detailed policy issues (e.g., funding)
- The discussion of all the States was not well facilitated and was not helpful
- Prevention strategies
- Nothing. Discussion was very well-rounded
- Kinship Legal Guardian Subsidy Programs and how they are administered
- Immigrant and Supplemental Security Income (SSI) households
- More detailed, practical information about how specific goals were accomplished
- Best/most effective use of funds—how to draw on diverse funding streams
- Services available to illegal immigrants, especially in border States
- Additional funding sources

**In what aspects of the child-only caseload would you like to receive additional technical assistance?**

- How to work with non-recipient caretakers to secure employment, training, and other services (e.g. parenting classes)
- How to integrate services
- Prevention efforts
- Cost effective program design

- Undocumented aliens
- Caretaker relatives and SSI families
- Blending services throughout agencies
- Housing